

Work Order ID 87977

Friday, July 20, 2012 11:18:47 AM

87977

Page 1

Item ID: D350-727-045

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Wearplate, Full Length, LH/RH

Stop

NS2

Start Date: 7/20/2012 Start Qty: 2.00

2

Cust Item ID:

Required Date: 7/20/2012 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan: *MF*Date: *7-20-12* Cooling: _____

Date: _____

Run Start

NR1

QC: _____

Date: _____ SPC (Y/N): _____

Date: _____

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
IIN D350-727	Rev A

100

100

DOCUMENT CONTROL

5f

0.00

DC

Document Control

Memo

Photocopy bluefile and create labels per PPP D350-727-045 CHG002

*DAS
16
9-8**7/20/2012*

110

110

Pick Kit

0.00

Packaging

Packaging

Memo

0.00

2 12/7/2012

120

120

QC4- 100% Inspect kits for completeness

0.00

QC

Quality Control

Memo

0.00

*DAS
16
9-8**7/20/2012*

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab. <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <hr/> <hr/> <hr/>							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <hr/>							
				<input type="checkbox"/> Other							

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Page 2

Item ID: D350-727-045

Accept

N900040100

Setup

Start *NS1*

Revision ID:

Item Name: Wearplate, Full Length, LH/RH

Stop

NS2

Start Date: 7/20/2012 Start Qty: 2.00

2

Cust Item ID:

Required Date: 7/20/2012 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run

Start *NR1*

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

130

Packaging

Packaging

0.00

Packaging

Memo

0.00

Identify and pack for shipping as per PPP D350-727-
045 Location: _____ PPP Rev: _____

12/7/2012

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Quality Control

Memo

0.00

MUR 12/07/2012

MF 12/07/2012
12/07/2012

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS										
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other								
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector					
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
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Unapproved															
FAULT CATEGORY															
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Picklist Print

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Page 1

Work Order ID: 87977

Parent Item: D350-727-045

Parent Item Name: Wearplate, Full Length, LH/RH

Start Date: 7/20/2012

Required Date: 7/20/2012

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP Rev:A05.05.12New issueKJ/JLM
VERF:EC

IPP REV:B 12.04.11 AS PER ECN 12-546 DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3319-1 Wearplate		Manufactured	No			110	Each	7.0000	1	2	✓		

Location Loc Qty Loc Code
ST497 7
85026 7

S D3319-3
Wearplate

Manufactured	No	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
		ST497	2	
		84084	2	

Location Loc Qty Loc Code
ST497 2
84084 2

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order:			DISPOSITION			AGAINST DEPARTMENT/PROCESS									
			Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering				
			Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality				
			Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other				
			Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector				
Doc/Data															
Equip/Tooling															
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